## 10/562149

## JC10 Rec'd PCT/PTO 23 DEC 2005

### APPLICATION DATA SHEET

Application Information

Application Type::

Subject Matter:: Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)::

Number of copies of CRF::

NOVEL PYRROLODIHYDROISOQUINOLINES Title::

USEFUL IN THE TREATMENT OF CANCER

27099U

No

0

No

No

National Phase

Utility

None

Request for Early Publication?::

Request for Non-Publication?:: No

Suggest Drawing Figure::

Attorney Docket Number::

Total Drawing Sheets::

Small Entity?::

Latin name::

Variety denomination name::

Petition included?::

Petition Type::

Licensed U.S. Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

Applicant Information

Inventor Applicant Authority type::

Primary Citizenship Country::

Full Capacity Status::

Matthias Given Name::

Middle Name::

VENNEMANN Family Name::

Name Suffix:::

Konstanz City of Residence::

Initial 12/20/2005

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Country of Residence:: DE

Street of Mailing address:: Leinerstrasse 20,

City of mailing address:: Konstanz

State/Province of mailing address::

State or Province of Residence::

Country of mailing address:: DE

Postal Code of mailing address:: 78462

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Thomas

Middle Name::

Family Name:: BAER

Name Suffix:::

City of Residence:: Reichenau

State or Province of Residence::

Country of Residence:: DE

Street of Mailing address:: Berggaessle 5,

City of mailing address:: Reichenau

State/Province of mailing address::

Country of mailing address:: DE

Postal Code of mailing address:: 78479

Applicant Information

Applicant Authority type:: Inventor

Primary Citizenship Country:: DE

Status:: Full Capacity

Given Name:: Juergen

Middle Name::

Family Name:: BRAUNGER

Name Suffix:::

City of Residence:: Konstanz

State or Province of Residence::

Country of Residence:: DE

Street of Mailing address:: Dorfwiesenweg 26,

City of mailing address:: Konstanz

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State/Province of mailing address::

Country of mailing address::

DE '

Postal Code of mailing address::

78465

Applicant Information

Applicant Authority type::

Inventor

Primary Citizenship Country::

DE

Status::

Full Capacity

Volker

Given Name::
Middle Name::

Family Name::

GEKELER

Name Suffix:::

City of Residence::

Konstanz

State or Province of Residence::

Country of Residence::

DE

Street of Mailing address::

Im Gruen 15,

City of mailing address::

Konstanz

State/Province of mailing address::

Country of mailing address::

DΕ

Postal Code of mailing address::

78465

Representative Information

| Representative Customer | Number:: | 034375 |
|-------------------------|----------|--------|
|                         |          |        |

### Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|---------------|-------------------|----------------------|----------------------|
|               |                   |                      |                      |
|               |                   |                      |                      |

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### Foreign Priority Information

| Country:: | Application number:: | Filing Date::             | Priority Claimed:: |
|-----------|----------------------|---------------------------|--------------------|
| EP        | 03014424.0           | 30 June 2003 (30.06.2003) | Yes                |
|           |                      |                           |                    |

### Assignee Information

Assignee name::

Altana Pharma AG

Street of mailing address::

Byk-Gulden-Str. 2

City of mailing address::

Konstanz

State/Province of mailing address::

Country of mailing address::

DΕ

Postal Code of mailing address::

78467